PTO/SB/06 (12-04)

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| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 | | | | | | | | | Application or Docket Number | | | |
|---|---|--|---|--|-----------------------------------|---|--------------------|-----------------------------|------------------------------|----------------------------|-----------------------------|--|
| APPLICATION AS FILED – PART I (Column 1) (Column 2) | | | | | | | SMALL | ENTITY | OR | OTHER THAN SMALL ENTITY | | |
| | FOR | NUMBE | R FILED | NUMBI | NUMBER EXTRA | | RATE (\$) FEE (\$) | | | RATE (\$) | FEE (\$) | |
| | IC FEE FR 1.16(a), (b), or (c)) | | | | • | 1 | | | 1 | | . == (*/ | |
| SEA | RCH FEE | | · ··· -·· | | | 1 | , | | | | | |
| EXA | FR 1.16(k), (i), or (m)) MINATION FEE | <u> </u> | | | | 1 | | | | | | |
| (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS | | | | | | ┨ | | | 1 | | | |
| (37 C | CFR 1.16(i)) PENDENT CLAIMS | <u> </u> | minus 20 | | | - | X = | | OR | X = | | |
| | CFR 1.16(h)) | | minus 3 | | | | x = | | | x = | | |
| FEE (37 C | CFR 1.16(s)) | sheets of is \$250 (\$ additional 35 U.S.C: | paper, the 125 for sn 50 sheets 41(a)(1)(0 | nd drawings e application sinall entity) for or fraction the and 37 CFI | ize fee due each ereof. See | | : | | | | | |
| MUL | TIPLE DEPENDENT | CLAIM PRES | ENT (37 CF | R 1.16(J)) | | j | | | | | | |
| • If ti | * If the difference in column 1 is less than zero, enter "0" in column 2. | | | | | | | | l | TOTAL | | |
| | APPLICA | TION AS A | MENDE | D – PART II | | | | | | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | SMALL | ENTITY | OR | OTHER THAN SMALL ENTITY | | |
| 11 | 109se | CLAIMS EMAINING AFTER INNOMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL FEE (\$) | |
| AMENDMENT | Total (37 CFR 1.16(i)) | 10 | Minus | " <i>5</i> % | = | | x = | | OR | х = | | |
| 힞 | Independent * (37 CFR 1.16(h)) | V | Minus | ··· 93 | = / | 1 | х = | | OR | x = | | |
| ME | Application Size Fee | € (37 CFR 1.16 | S(s)) | | <u> </u> | 1 | | | | | | |
| ⋖ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | OR | | | |
| | | | | | | 3 | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | | |
| | (0 | Column 1) | | (Column 2) | (Column 3) | | | 1 | | | | |
| ENT B | | CLAIMS EMAINING AFTER IENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (\$) | ADDI- TIONAL FEE (\$) | | RATE (\$) | ADDI- TIONAL FEE (\$) | |
| ME | Total * (37 CFR 1.16(i)) | | Minus | | = | 1 | x = | 1 | OR | x = | | |
| | Independent * (37 CFR 1.16(h)) | | Minus | ••• | = | 1 | x = | | OR | x = | | |
| AMEND | Application Size Fee (37 CFR 1.16(s)) | | | | | 1 | | | J OK. | | | |
| ٨ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) | | | | | | | | OR | | | |
| | | | | | | - | TOTAL ADD'L FEE | | OR | TOTAL ADD'L FEE | | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". | | | | | | | | | | | | |

"" If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS Application. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10611563

| (Column 1) (Column 2) | | | | | | | SMALL ENTITY TYPE | | | OB | OTHER THAN OR SMALL ENTITY | |
|--|---|---|------------------|----------------------------------|---------------------|------------------|-------------------|------------|------------------------|-------------------------|-------------------------------|------------------------|
| TOTAL CLAIMS | | | 47 | | | | RAT | E | FEE |] | RATE | FEE |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASIC | | | OR | BASIC FEE | 750.00 |
| TOTAL CHARGEABLE CLAIMS | | | √ 2minus 20= * 7 | | * ك | ۲_ | X\$ | 9= | | OR | X\$18= | 396 |
| INE | EPENDENT CL | AIMS | % minus 3 = * 5 | | | | X42 | ?= | | OR | X84= | 420 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | | | | | <u> </u> | | | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | +14 | | | OR | +280= | | |
| | | | | | | | ТОТ | AL. | L | OR | TOTAL | 1566 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 2) | | | | | (Ċolumn 3) | SMALL ENTITY | | | OR | OTHER THAN SMALL ENTITY | | |
| AMENDMENTA | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIC PAID | EST BER OUSLY | PRESENT EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | X\$ 9 |) = | | OR | X\$18= | • |
| | Independent | * INTATION OF MI | Minus | *** | CI AINA | = | X42 | = | | OR | X84= | |
| _ | THOTFILSE | TATION OF IM | JETIPLE DEF | ENDENT | CLAIM | | +140 |)= | | OR | +280= | |
| | | | | | | | TO ADDIT. | TAL | | OR | TOTAL ADDIT. FEE | |
| _ | (Column 1) (Column 2) (Column 3) | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUMI PREVIO PAID | BER OUSLY | PRESENT EXTRA | RAT | Ε | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | . | Minus | ** | | = | X\$ 9 |)= | | OR | X\$18= | |
| | Independent | * NTATION OF MU | Minus | *** | 0 | = | X42 | _ | | OR | X84= | |
| | FINST PRESE | NIATION OF MI | JUIPLE DEF | ENDENT | CLAIM | L | +140 |)= | | OR | +280= | · |
| • | | | | | | | | TAL | | | TOTAL | |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) | | | | | | | | | | · | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | 1 | HIGH NUME PREVIC PAID I | EST BER OUSLY | PRESENT EXTRA | RAT | E | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | • | Minus | ** | | = | X\$ 9 | = | | OR | X\$18= | |
| | Independent | * | Minus | *** | | = | X42 | | | | X84= | |
| FIRST PRESENTATION OF MOLTIPLE DEPENDENT CLAIM | | | | | | | | | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20 color "20" ** TOTAL | | | | | | | | | | | | |
| *** | ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FEE | | | | | | | | | | | |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |